UNITED STATES DISTRICT COURT

for the

| Western District of Texas | | | | | |
|--|---|--|--|--|--|
| Empower Aesthetics LLC, |))) | | | | |
| Plaintiff(s) V. Empower Aesthetics TX, PA, and SCP MedSpa Services, LLC |)) Civil Action No. 1:24-cv-01134) | | | | |
| Defendant(s) |) | | | | |
| SUMMONS IN A CIVIL ACTION | | | | | |
| To: (Defendant's name and address) Empower Aesthetics TX, F c/o C T Corporation Syste 1999 Bryan Street, Suite 9 Dallas, Texas 75201 | m | | | | |
| A lawsuit has been filed against you. Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, | | | | | |
| whose name and address are: Aaron P. Peacock Peacock Law Firm PLLC 4131 N. Central Expressw Dallas, Texas 75204 | vay, Suite 961 | | | | |
| If you fail to respond, judgment by default will be You also must file your answer or motion with the court. | entered against you for the relief demanded in the complaint. | | | | |
| | CLERK OF COURT, PHILIP J. DEVLIN | | | | |
| Date: | Signature of Clerk or Deputy Clerk | | | | |
| | | | | | |



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Civil Action No. 1:24-cv-01134

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

| was re | This summons for <i>(name ceived by me on (date)</i> | ne of individual and title, if any) . | | | |
|--------|---|---------------------------------------|---------------------------------|-----------|--|
| | ☐ I personally served | the summons on the individual at | (place) | | |
| | | | on (date) | ; or | |
| | ☐ I left the summons at the individual's residence or usual place of abode with (name) | | | | |
| | , a person of suitable age and discretion who resides there, | | | | |
| | on (date) | | | | |
| | ☐ I served the summons on (name of individual) , who designated by law to accept service of process on behalf of (name of organization) | | | | |
| | | | | | |
| | ☐ I returned the summ | nons unexecuted because | on (date) | ; or ; or | |
| | ☐ Other (specify): | | | | |
| | My fees are \$ | for travel and \$ | for services, for a total of \$ | 0.00 | |
| | I declare under penalty | of perjury that this information i | s true. | | |
| Date: | | | | | |
| | | | Server's signature | | |
| | | | Printed name and title | | |
| | | | Server's address | | |

Additional information regarding attempted service, etc: